GOVERNMENT OF INDIA
WOMEN AND CHILD DEVELOPMENT
LOK SABHA

UNSTARRED QUESTION NO:4396
ANSWERED ON:08.08.2014
NATIONAL CHILD HEALTH PROGRAMME
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Will the Minister of WOMEN AND CHILD DEVELOPMENT be pleased to state:

(a) whether the Government has implemented National Child Health Programme in the country, if so, the details and achievements thereof;

(b) the extent to which the said programme has been effective in bringing down the malnutrition level among children and women in the country;

(c) whether the Government has mooted a similar scheme in the country to improve the health of women and children and bring down the malnutrition level among them and if so, the details thereof; and

(d) the other corrective steps taken/being taken by the Government in this direction?

Answer

MINISTER OF WOMEN AND CHILD DEVELOPMENT (SHRIMATI MANEKA SANJAY GANDHI)

(a)& (b): There is no dedicated intervention named "National Child Health Programme" being implemented under Ministry of Health & Family Welfare. However, under National Health Mission, following interventions for child health are being implemented:

i. Strengthening Facility based newborn care: Newborn care corners (NBCC) are being set up at all health facilities where deliveries take place; Special New Born Care Units (SNCUs) and New Born Stabilization Units (NBSUs) are also being set up at appropriate facilities for the care of sick newborn including preterm babies. 525 Special New Born Care Units (SNCUs) have been setup at district hospitals, 1761 New Born Stabilization Units at CHCs and 14009 New Born Care Corners at other facilities

ii. Home Based Newborn Care (HBNC): Home based newborn care through ASHA has been initiated to improve new born practices at the community level and early detection and referral of sick new born babies. Out of 8.68 lakh ASHAs in the country, 5.19 lakh have been trained in Module 6 & 7, which provide necessary skills to assess new borns. 12.4 lakh newborns visited under the HBNC scheme as on 2013-14.

iii. Integrated Management of Neo-natal and Childhood Illness (IMINCI) is being implemented through skill building of ANMs, Nurses and doctors for early diagnosis and case management of common ailments such as Acute Respiratory Infection, Diarrhoea, fever etc. in children. 25871 health care providers have been trained in facility based IMNCI training, 125691 health care providers have been trained in NSSK.

iv. Universal Immunization Programme covers about 13.5 crore children for vaccination against seven vaccine preventable diseases, through 90 lakh immunization sessions each year.

v. Promotion of Institutional Delivery through Janani Suraksha Yojana (JSY) and Janani Shishu Suraksha Karyakram (JSSK): Promoting Institutional delivery to ensure skilled birth attendance is key to reducing both maternal and neo-natal mortality.

vi. Village Health and Nutrition Days in rural areas as an outreach activity, for provision of maternal and child health services and creating awareness on maternal and child care including health and nutrition education.

vii. Management of Malnutrition: Emphasis is being laid on reduction of malnutrition which is an important underlying cause of child mortality. Nutritional Rehabilitation Centres are being established for management of Severe Acute Malnutrition (SAM)- 872 NRCs have been established. National Iron Plus Initiative has been launched to prevent and control iron deficiency anaemia through introduction of IFA Supplementation for children (above six months of age), adolescents and women in the reproductive age group besides those who are pregnant or lactating. Vitamin A supplementation for under five children is also undertaken.

viii. As breastfeeding reduces infant mortality, exclusive breastfeeding for first six months and appropriate infant and young child feeding practices are being promoted in convergence with Ministry of Woman and Child Development.

ix. Rashtriya Bal Swasthya Karyakram (RBSK) for Child health screening and early intervention services has been launched to provide comprehensive care to all the children in the age group of 0-18 years in the community. The purpose of these services is to improve the overall quality of life of children through early detection of birth defects, diseases, deficiencies, development delays including

disability. By January, 2014, the number of children screened has exceeded 5.82 crore, (69.80 lakhs children from birth to 6 years and 5.13 crores children enrolled in Government and Government aided school). 1.30 lakh have received free treatment including surgeries for congenital heart disease, cleft lip and correction of club foot etc.

x. To sharpen the focus on vulnerable and marginalized populations in underserved areas, 184 High Priority Districts have been identified for implementation of Reproductive Maternal Newborn Child Health+ Adolescent (RMNCH+A) interventions for achieving improved maternal and child health outcomes.

The above mentioned interventions are targeted towards reduction of Infant mortality.

(c): Ministry of Women and Child Development is administering the Integrated Child Development Services (ICDS) Scheme which was launched in 1975 with the objectives (i) to improve the nutritional and health status of children in the age-group 0-6 years; (ii) to lay the foundation for proper psychological, physical and social development of the child; (iii) to reduce the incidence of mortality, morbidity, malnutrition and school dropout; (iv) to achieve effective co-ordination of policy and implementation amongst the various departments to promote child development; and (v) to enhance the capability of the mother to look after the normal health and nutritional needs of the child through proper nutrition and health education.

Integrated Child Development Services (ICDS) Scheme is a centrally sponsored scheme being implemented by the State Governments/UT Administrations. The scheme aims at holistic development of children below 6 years of age and pregnant women & lactating mothers by providing a package of six services comprising (i) Supplementary nutrition (ii) Pre-school non-formal education (iii) Nutrition and health Education (iv) Immunization (v) Health check- up and (vi) Referral services through Anganwadi Centres at grassroots level. Three of the six services viz. immunization, health check-up and referral services are related to health and are provided by the Ministry of Health and Family Welfare through NRHM and Public Health Infrastructure.

In order to address various programmatic, management and institutional gaps and to meet administrative and operational challenges, Government approved the proposal for Strengthening and Restructuring of ICDS Scheme in September 2012 with an over-all budget allocation of Rs. 1,23,580 crore during 12th Five Year Plan. Restructured and Strengthened ICDS has been rolled out during the year 2012-13 to 2014-15 in a phased manner.

The goal of ICDS Mission is to attain three main outcomes namely; (i) Prevent and reduce young child under-nutrition (% underweight children 0-3 years) by 10 percentage point; (ii) Enhance early development and learning outcomes in all children 0-6 years of age; and (iii) Improve care and nutrition of girls and women and reduce anemia prevalence in young children, girls and women by one fifth. Annual Health Survey (AHS) and District Level Household Survey (DLHS) will be used as baseline for measuring the outcomes of ICDS Mission.

(d): To reduce malnutrition among children and women in the country, various other schemes/ programmes i.e. National Rural Health Mission (NRHM), Mid-Day Meal Scheme(MDM), Rajiv Gandhi Schemes for Empowerment of Adolescent Girls (RGSEAG) namely SABLA, Indira Gandhi Matritva Sahyog Yojna (IGMSY) are being implemented as direct targeted interventions, besides, indirect Multi-sectoral interventions include Targeted Public Distribution System (TPDS), National Horticulture Mission, Mahatma Gandhi National Rural Employment Guarantee Scheme (MGNREGS), Nirmal Bharat Abhiyan, National Rural Drinking Water Programme etc.